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In preparing replies to these inquiries I am aware that there may be some expense to be incurred by the consul, particularly in obtaining illustrations or plans of the harbors, and this Department will pay from the Epidemic Fund at its disposal such necessary expenses as may be incurred by the consuls in obtaining these plans and illustrations.

I have the honor to remain, respectfully, yours.

L. J. GAGE, *Secretary.*

Hon. SECRETARY OF STATE.

[Reports to the Supervising Surgeon-General, United States Marine-Hospital Service.]

Cerebro-spinal meningitis in Mobile, Ala.

MOBILE, ALA., March 17, 1899.

SIR: I have the honor to state that the fourth case (a colored man) of cerebro-spinal meningitis died on the 10th instant. No other cases reported.

Respectfully, yours,

R. D. MURRAY,
Surgeon, U. S. M. H. S.

Diphtheria, influenza, scarlet fever, and smallpox in Chicago, Ill.

CHICAGO, ILL., March 13, 1899.

SIR: I have the honor to make the following report relative to contagious diseases in this city during the week ended March 11, 1899, viz, 20 certificates of death were returned to the office of the commissioner of health giving influenza or la grippe and its complications as the cause thereof, 6 to uncomplicated influenza and 14 to influenza as the cause, complicated with other affections, chiefly pneumonia. During the same period 9 certificates of death were returned, giving scarlet fever as the cause thereof, 100 cases being reported; also 14 giving diphtheria as the cause, 71 cases being reported, and 1 case of smallpox as reported in my letter of the 10th instant.

Respectfully, yours,

HENRY W. SAWTELLE,
Surgeon, U. S. M. H. S.

Measles in Boston, Mass.

BOSTON, MASS., March 12, 1899.

SIR: I have to report that there were 214 cases of measles in Boston during the past week. Only 2 deaths from this disease were returned to the board of health.

Respectfully, yours,

FAIRFAX IRWIN,
Surgeon, U. S. M. H. S.

Influenza in New Haven, Conn.

NEW HAVEN, CONN., March 15, 1899.

SIR: In response to circular letter of December 24, 1898, I inclose a report written by Dr. Mailhouse, who had charge of my work during my illness. During the epidemic in this locality I was unable to attend to my business, and was in Florida.

Respectfully, yours,

JNO. P. C. FOSTER,
Acting Assistant Surgeon.

[Inclosure.]

The epidemic of la grippe which visited New Haven during the winter of 1898-99 arrived about the middle of November, attained its greatest intensity toward the end of December, and has now, February 4, about run its course, though a few cases are

still coming to light. In general prevalence and intensity of symptoms this visitation resembled very much that of seven years ago ; there was this marked difference, however, namely, that, while in the winter of 1891-92 the epidemic affected more particularly the middle-aged and able-bodied, in this epidemic infants and the aged were given the preference. In fact, the old folks were frequently and severely affected, and the prostration and subsequent debility were intense and convalescence much protracted. High temperatures prevailed in the earlier cases, while later on moderate elevation to 101°-102° were the more common. The gastric type was very prevalent, vomiting or dry retching being the prominent symptom in very many cases. Others suffered more from dry hacking cough which prevented sleep and was accompanied with substernal soreness or rawness. A sense of soreness or pain in the region of the trachea was frequently complained of. Actual tonsillitis or pharyngitis was rare. A symptom noted by several physicians and unobserved in previous epidemics was a bloody sputum unattended by symptoms or physical signs of pneumonia, and undoubtedly due to rupture of distended bronchial capillaries from violent fits of coughing. Injection of the conjunctivæ was common, though much less intense than heretofore seen. Tenderness of the eyeballs was not often met with. Nasal catarrh was also less common and less severe than formerly. Pains in the limbs and headache were equally frequent, often concomitant, and both symptoms much less intense than in previous visitations of the disease. Chills and chilly feelings also less common than formerly. Diarrheas were rare. Lobular pneumonia was a fairly frequent complication, though I am unable to state the percentage. The contagious nature of the affection has been proved in innumerable instances, and there is no doubt of the fact. For example, one in a family frequently came home with the disease and others would begin to show symptoms in three or four days, after which it would go through every member of the family. A patient of mine, isolated because of severe neurasthenia, became affected through her husband, who in his turn acquired it from a neighbor who called while convalescent but still coughing ; the husband entertained the visitor down stairs while the neurasthenic remained abed upstairs. Persistent dry coughs, anorexia, myalgias, and general debilitated condition were the most frequent sequelæ of the disease.

Smallpox in the United States.

ALABAMA.

Mobile.—Surgeon Murray reports, March 17, 2 new cases sent to the pesthouse on the 12th instant. He also reports 3 deaths from smallpox within the last two weeks at McLaurin, Perry County, Miss.

DISTRICT OF COLUMBIA.

Washington.—Dr. Woodward reports, March 18, no new cases since March 11. There are at present 14 cases in hospital, 6 houses in quarantine, and no suspicious cases under observation. March 19, 1 new case ; March 20, 2 new cases.

FLORIDA.

Key West.—Assistant Surgeon McAdam reports, March 12, 1 new case, and on the 16th, 1 new case.

GEORGIA.

Savannah.—Acting Assistant Surgeon Jarrell reports, March 20, 1 new case of smallpox.

ILLINOIS.

Chicago.—Surgeon Sawtelle reports, March 20, that the crew of the light house tender at that station have been vaccinated.